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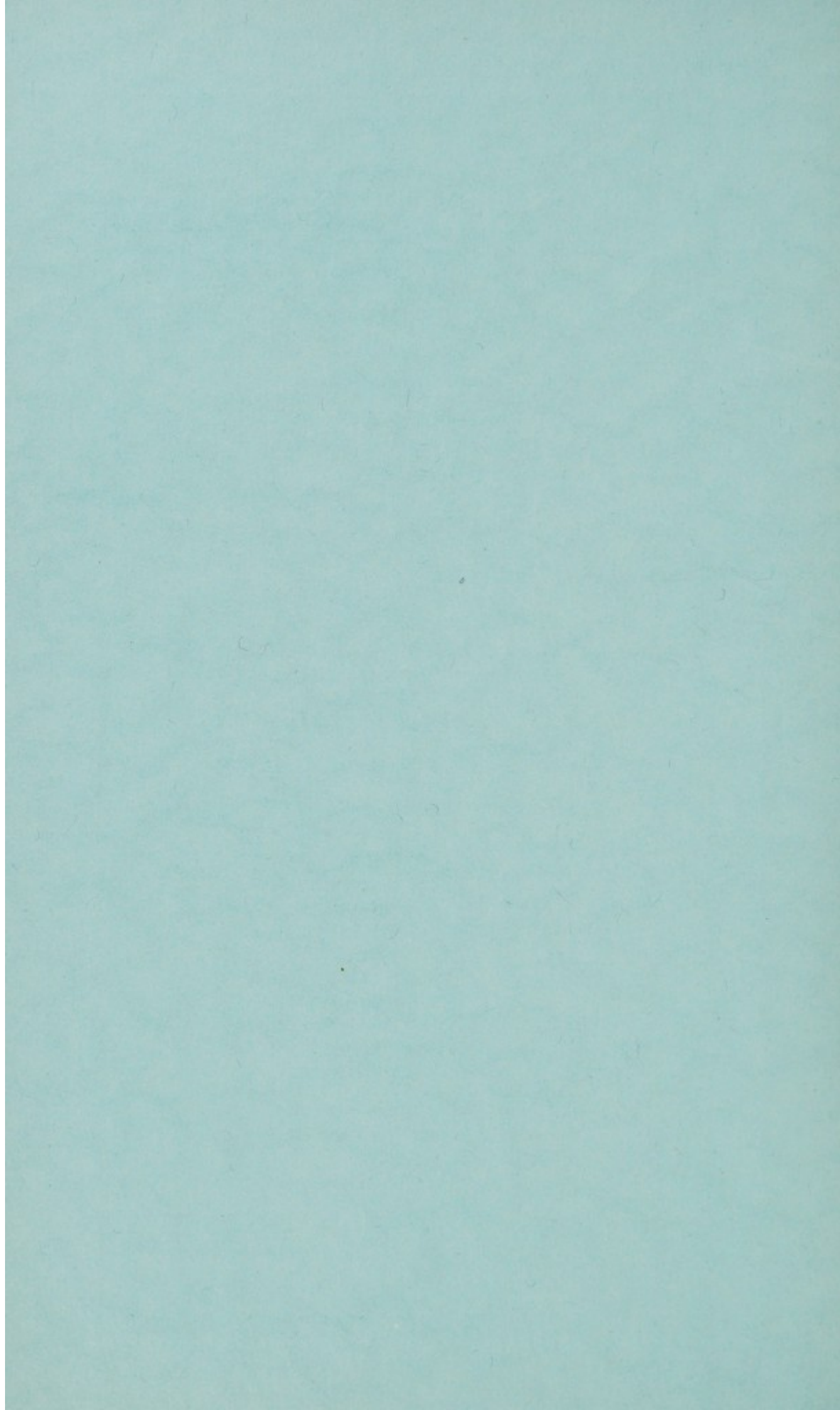
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WARRINGTON RURAL DISTRICT COUNCIL

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ANNUAL REPORT

ON THE WORK OF THE
PUBLIC HEALTH
DEPARTMENT
FOR THE YEAR 1954



WARRINGTON RURAL DISTRICT COUNCIL

**ANNUAL
REPORT**

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PUBLIC HEALTH
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FOR THE YEAR 1954

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Deceased 9th October.

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Until October, Chairman since October.

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*—Qualified Inspectors of Meat and Other Foods (R.S.I.)

WARRINGTON RURAL DISTRICT COUNCIL

**ANNUAL REPORT OF THE MEDICAL OFFICER
OF HEALTH FOR THE YEAR 1954.**

TO THE CHAIRMAN AND MEMBERS,
WARRINGTON RURAL DISTRICT COUNCIL.

MR. CHAIRMAN AND GENTLEMEN.

I have pleasure in submitting for your consideration and approval my Annual Report for the Year 1954, relating to the vital statistics, the Sanitary services, and the ancillary general health services which, under general enactments, notably the National Health Service Act of 1946, are the responsibility of the Lancashire County Council as a Local Health Authority. In my view it is quite essential that both the "environmental" and "sanitary" services of the "Local Sanitary Authority," and the more personal services devolving on the "Local Health Authority" should be very closely co-ordinated, being, as is clearly the case, each complementary to the others.

As in previous reports, I propose to include in the following pages detailed statistics reflecting the health of the population in the Rural District; many of these will be recorded in the form of tables, which lend themselves not only to a quick appraisal but also to the comparative study of figures for previous years. In this introduction, however, I propose to draw attention only to the salient features of interest: a more detailed analysis may readily be made by reference to the later text of the report. Again, as in previous reports, the combined efforts of the whole "health team" are included within its pages, so that at the very outset I would like to acknowledge this and to pay tribute to all staff in the health department, for the efficiency, loyalty, co-operation and spirit of public service so evident in the team.

Reference to the "District Statistics" in Section I immediately following this preface, shews that there have been slight reductions, both in acreage and in population figures: these are accounted for by the slight boundary revision in the Orford area (to the gain of the Warrington County Borough) and to a diminution of population resulting in the main to changes in the strength of American service personnel and their families at Burtonwood. It will also be seen that the actual number of births assignable to the Rural District (464) is slightly less than in 1953 (481) and that as the number of deaths assignable (331) is (rather unusually) identical with last year's figure, the "natural increase" of the population (the excess of births over deaths) is rather less (133) than was the case in 1953 (150).

Reviewing next the vital statistics in Section II, it will be seen that the live births belonging to the area (464) only 13 were illegitimate, or 2.8% of the total live births, as compared with 3.3% in

1953 and 5.2% in 1952—a gratifying reduction which maintains the downward trend. The “crude” live birth rate (12.9 per 1,000 population) is very slightly and insignificantly higher than a year ago, whereas the “adjusted” rate is rather less—16.1 per 1,000 as compared with 18.6 per 1,000. This results from the lower “comparability factor,” (supplied by the Registrar General), which reflects the influence of many other factors on the actual birth rate and which this year is in keeping with the slight decrease in population, particularly the male population referred to above.

The purpose of this comparability factor or index of course is to enable a rate figure to be obtained which is more truly valid when considering similar rates in other districts of the country than would be the “actual” rate or rates : obviously if the age and sex distribution of a local population shewed a very high proportion of older persons and a predominance of males, one could not reasonably expect the actual birth rate to be high : so that in such a case the comparability factor would itself be high to compensate for this unusual age and sex distribution. The “adjusted” birth rate, however, obtained by the product of the “actual” rate and the “comparability factor” will thus quite evidently be a more valid figure from which to commence any assessment or analysis of the health of the district, *as reflected by the birth rate*, than would the “crude” or “actual” rate.

Similar considerations apply when dealing with death rates in any locality : a preponderance of young people would obviously lead naturally to a low death rate, so that were the “crude” death rate used for purposes of comparison with the death rates of other districts *in attempting an assessment of the health of those districts* the conclusions drawn from such a comparison—say with a district where there was a preponderance of older persons—would obviously be erroneous. The rather high “comparability factor” for the local death rate, which this year is 1.53 (as compared with 1.58 in 1953) therefore indicates the comparative youthfulness of our population when considered in relation to that of the country as a whole.

Both the actual still-births recorded, and the still-birth rate shew a welcome fall, the former from 10 to 6, and the latter from 20 per 1,000 total births to 13 per 1,000 total births : whilst the “infant mortality” figures—(the deaths and death rates of babies less than 12 months old)—are virtually the same as in 1953, being 30 per 1,000 live births as compared with 29 per 1,000 in 1953. The number of neo-natal deaths, however, has risen slightly, from 9 to 11, giving an increase of rate for neo-natal mortality of 5 per 1,000, from 19 per 1,000 to 24. Bearing in mind therefore that the underlying causes of stillbirths and of deaths in the first four weeks of life, are very closely linked and often basically the same, the fall in the still-birth rate is almost equally offset by the rise in the neo-natal death rate.

It is gratifying to note that there have been no maternal deaths during the year for the sixth year in succession ; such a very happy sequence of events should however not lead to undue complacency on anyone's part whether doctor, midwife, councillor or expectant mother ; for solely by the laws of chance we may expect this record period of immunity to come to an end.

The comparative table of vital statistics (for the years 1949 to 1954) clearly shews a downward trend in the birth rate (which trend follows that of the country generally), a slightly variable death-rate, a wide variation in the still-birth and infant-mortality rates, and a decidedly upward trend in the neo-natal death rate, which now is constituting a steadily higher proportion of the total infant death rate. This indicates that whereas the control of many of the diseases of early infancy, notably the infectious, is becoming more certain, prevention of the causes underlying premature birth, congenital malformation and deformities is lagging behind.

Considering next the number and causation of all the deaths of persons belonging to the district, it is found that although the actual total of 331 is the same as last year, there has been a slight shift in the sex distribution, there being a small decrease in the number of male deaths and a similar increase in the number of female deaths : the slightly higher actual rate is of course the result of fall in population, whilst the rise in the "adjusted" rate from 13.9 per 1,000 to 14.1 per 1,000 is similarly accountable, despite a minor reduction in the comparability factor from 1.58 to 1.53. Analysis of the causes of death, in their order of frequency, reveals much the same picture as in previous years : heading the list comes "Diseases of the Heart and Circulation," which if we include the "Strokes," (the vascular diseases of the nervous system), total no fewer than 164, or virtually one-half of the total deaths, of which 82 were due to general heart disease, 39 to strokes and 32 to Coronary disease or angina : next comes "Cancer," with 56 fatalities, Bronchitis and Pneumonia, (including influenzal pneumonia), with 31, deaths from violence with 27, of which 18 were accidental, (including 6 due to traffic accidents), and 9 due to suicide ; whilst 25 deaths are classified as due to "Other defined and ill-defined diseases." Finally comes respiratory tuberculosis, with 15 deaths—4 more than in 1953.

Probably the most striking feature of this review of causes is the higher proportion of "Strokes," (which caused nearly 12% of the total deaths and were 9 more than in 1953), and of deaths from violence, (27), which caused over 8 per cent., or one in every twelve of the total. Of these it will be noted that no fewer than 9 were due to suicide, whereas only 6 were the result of traffic accidents. Finally, the 15 deaths resulting from respiratory tuberculosis is a higher figure than at any time during the last five years, and almost double the mean figure (8) for those years.

At 317 the number of notifications of infectious diseases is less than in any year since 1949 (357) and very considerably less

than the mean figure for the five years 1949-53 (553). In the main this has been due to the lower incidence of Measles (198) as compared with the previous year (239), and with the exceptionally high total of 480 in 1952 : also to a most unusual circumstance—a virtual absence of Whooping cough in the district, only 1 notification having been received, against a mean of 72 cases per year since 1949. Cases of dysentery also shewed a very marked reduction, totalling only 3, as compared with 85 in 1953, and a quinquennial mean figure of 32 for the previous five years. Once again there were no cases of diphtheria, puerperal pyrexia, ophthalmia neonatorum, poliomyelitis (infantile paralysis) meningitis or of the enteric group fevers. On the whole, therefore, the year shews a most satisfactory record, but one which is unlikely to be maintained until such time as the satisfactory prophylaxis of measles is accomplished. Respiratory tuberculosis notifications however, at 27, although lower than last year's high record of 37, and on a par with the figure of 25 in 1952, are higher than the quinquennial mean of 22, a fact which to some extent may reflect a true increase in incidence, but which may quite possibly also be influenced by changes in the notification procedure of this disease occasioned by conflicting interpretations of the Public Health (Tuberculosis) Regulations of 1952.

In so far as environmental health hygiene is concerned, the main requirements of the district are additional and improved housing amenities : better drainage and sewerage facilities, both as regard surface drainage and domestic wastes : the prevention of nuisances arising from the misuse of streams and watercourses, the degree of pollution of which turns some of them into open sewers : the prevention of nuisances arising from certain offensive trades, and to some extent from tipping sites ; and improvement to both the quantity and quality of water supplies, the former in the low-lying areas of Sankey, and the latter in isolated cottages and farmsteads relying on springs and shallow wells, which cases happily are becoming fewer from year to year, and now total less than a score of dwellings out of more than 7,000. In so far as housing is concerned, undoubtedly the introduction of the Housing Repairs and Rents Act of 1954, by virtue of its requirement for the submission of a housing scheme by each local authority in particular, and by its other provisions in general, has done much to stimulate public interest in housing defects and deficiencies. Drainage and Sewerage schemes, especially those for the parishes of Padgate and Woolston, and parts of Winwick and Croft, have gone steadily forward, whilst complaints of nuisances from offensive trades have been much fewer than for some years past. Water supplies, on the other hand, still give rise to some anxiety as regards their adequacy, owing to the greater demand for supplies by the Burtonwood Air Base, by industrial consumers and through conversions to the water-carriage system of many pail closets attached to houses in the County Borough of Warrington, coupled of course with the rapid

housing development of that Authority, as well as of our own. New sources of supply are being developed by the Water Authority, but many "teething troubles" have been encountered: these however are being steadily overcome.

As in former years the later sections of this report give general and statistical information concerning the "personal" health services provided by the Local Health Authority through its scheme for the divisional administration of these services, which must be, and are, integrated as closely as possible with the "sanitary" services, and play a complementary part in the maintenance of both individual and community health. Although, of course, they do not come under any direct control of this Committee and Council, they must be of very considerable interest to each Member.

Finally, Mr. Chairman, I must express to you and to all Members of the Health Committee, and of the Council, my very sincere appreciation and thanks for the interest and close support received from everyone in the cause of Public Health, and for the service which each member of your departmental team has contributed to the common aim of improving the health and happiness of the community. In paying this general tribute, I cannot but remember with both gratitude and affection the close contact which the late Chairman of the Council, Mr. J. J. P. Palin, maintained with the Health Department, and I may perhaps be permitted here to include a tribute to the great ideal of public service which he exemplified so well and to the encouragement which he gave in this and in many other ways. My thanks are due also to the Clerk of the Council, and to the Chief Officers of every Department for their ready co-operation and helpful advice on matters of common interest in our respective fields. To Mr. Morrison, the Chief Sanitary Inspector, to the additional Inspectors, and to the administrative and clerical staff of the Health Department, I offer my thanks for their continued efficiency, loyalty and team spirit. Mr. Morrison's success in his final examination for the Bar, must I feel call for special congratulations, for thereby, apart from his personal success the Health Department gains some degree of reflected glory.

I have the honour to be,

Mr. Chairman and Gentlemen,

Yours obediently,

A. C. CRAWFORD,

MEDICAL OFFICER OF HEALTH.

SECTION I.

PHYSICAL CONDITIONS AND GENERAL DESCRIPTION.

The Warrington Rural District is situate in the South-west of the County of Lancaster. It is bordered on the North by the districts of the County Borough of St. Helens and the Urban Districts of Newton-le-Willows and Golborne; to the East is the Urban District of Irlam, and on the West is the Rural District of Whiston and the Borough of Widnes. The southern boundary, which is also the County boundary, is the Manchester Ship Canal, and the northern perimeter of Warrington County Borough.

The area of the district is approximately 35 square miles, being 14 miles from east to west, with a narrow waist of about two miles in the centre between Warrington and Newton, broadening to an average width of about six miles.

Agriculture is the principal occupation in the area, but there are in the more urban parishes a variety of industries, including tanning, light engineering, brewing, brick making and paint manufacture.

The area is, as a whole, comparatively low-lying with only a gentle undulation to relieve the otherwise flat landscape. The fall of the land is to the south, with the streams and brooks discharging into the River Mersey, which winds its way across the southern portion of the district only slightly to the north of the Manchester Ship Canal.

DISTRICT STATISTICS.

Area (acres)	...	...	...	...	...	22,733
Estimated population, 1954	...	...	...	...	...	35,930
Number of inhabited houses and flats	...	...	...	...	...	7,122
Rateable value	...	...	...	...	...	£191,282
Sum represented by a 1d. rate	...	...	...	...	...	£768
Births assignable to district	...	...	...	...	...	464
Deaths assignable to district	...	...	...	...	...	331
" Natural increase "	...	...	...	...	...	133

SECTION II.

VITAL STATISTICS.

BIRTHS :	M.	F.	Total
Live Births—Legitimate	225	226	451
Illegitimate	7	6	13
	<hr/> 232	<hr/> 232	<hr/> 464

Live Birth Rates—"Crude" 12·9; "Adjusted" 16·1 per 1,000
Population; Comparability factor 1·25.

	M.	F.	Total
STILL BIRTHS	Nil	6	6

Still Birth rate—13 per 1,000 total (Live and Still) Births.

DEATHS:	M.	F.	Total
General	173	158	331

Death Rates—"Crude" 9·2; "Adjusted" 14·1.
Comparability factor 1·53.

The "Adjusted" Death Rate is the "Crude" Death Rate
after adjustment by a "comparability factor" supplied
by the Registrar General.

INFANT DEATHS (Deaths of Infants under 1 year of age):

Total Infant Mortality Rate—14.

	M.	F.	Total
Infant Deaths	5	9	14
Infant Mortality Rate of Legitimate Infants—30.			
Infant Mortality Rate of Illegitimate Infants—Nil.			

NEO-NATAL MORTALITY:

Deaths of Infants under 4 weeks—11.

Neo-natal mortality rate—24 per 1,000 total live births.

MATERNAL DEATHS—Nil.

Maternal Death Rate—Nil.

VITAL STATISTICS—COMPARATIVE TABLE.

YEAR	LIVE BIRTHS		DEATHS (ALL CAUSES)		STILLBIRTHS		MATERNAL MORTALITY		INFANT MORTALITY				CANCER MORTALITY		
	No. regis- tered	Rate per 1,000 popu- lation	No. regis- tered	Rate per 1,000 popu- lation	No. regis- tered	Rate per 1,000 total births	No. of deaths regis- tered	Rate per 1,000 total births	TOTAL		NEO-NATAL		No. of deaths regis- tered	Rate per 1,000 popu- lation	P er- centage of al deaths
									No. of deaths regis- tered	Rate per 1,000 live births	No. of deaths regis- tered	Rate per 1,000 live births			
1954	464	*12.9	331	*9.2	6	13	Nil	Nil	14	30	11	24	55	1.5	16.6
1953	481	*12.8	331	*8.8	10	20	Nil	Nil	14	29	9	19	54	1.4	16.3
1952	455	11.6	225	5.7	16	34	Nil	Nil	14	31	9	20	35	0.9	15.5
1951	487	13.6	241	6.7	7	14	Nil	Nil	19	39	9	18	35	1.0	14.5
1950	429	13.0	225	6.8	20	45	Nil	Nil	12	28	5	12	34	1.03	15.1
1949	417	15.1	228	8.3	12	28	Nil	Nil	21	50	—	—	46	1.6	20.1
Average 5 years 1949—1953	—	13.2	—	7.2	—	28	—	Nil	—	35	—	—	41	1.18	16.3

—ADJUSTED

Live birth-rate (comparability factor, 1.25)@16.1 per 1,000

Death-rate (comparability factor, 1.53)@14.1 per 1,000

COMPARISON OF BIRTH RATES, DEATH RATES AND
ANALYSIS OF MORTALITY AND MORBIDITY.

	Warrington Rural.	England & Wales.
	1953.	1954.
	Rate per 1,000 population.	
BIRTHS—		
Live	12·8	12·9
Still	0·26	0·6
DEATHS—		
All causes (Adjusted)	8·8	9·2
Typhoid & Paratyphoid Fevers ...	0·00	0·00
Whooping Cough	0·02	0·00
Diphtheria	0·00	0·00
Tuberculosis	0·37	0·41
Influenza	0·00	0·02
Smallpox	0·00	0·00
Ac. Poliomyelitis & Encephalitis ...	0·00	0·00
Pneumonia	0·34	0·03
NOTIFICATIONS—		
Typhoid Fever	0·00	0·00
Paratyphoid Fever	0·00	0·00
Meningococcal Infection	0·00	0·00
Scarlet Fever	1·36	1·75
Whooping Cough	3·13	0·00
Diphtheria	0·00	0·00
Erysipelas	0·21	0·00
Smallpox	0·00	0·00
Measles	6·34	5·51
Pneumonia	0·61	0·61
Ac. Poliomyelitis (including Polio- encephalitis): Paralytic	0·00	0·00
Non-Paralytic	0·00	0·00
Food Poisoning	0·48	0·00
	Rate per 1,000 Live Births.	
DEATHS—		
All causes under 1 year of age	29	30
Enteritis and Diarrhoea under 2 years of age	0·00	0·00
MATERNAL MORTALITY—		
Excluding Abortion	0·00	0·00
Due to Abortion	0·00	0·00
	Rate per 1,000 Total (Live & Still) Births.	
NOTIFICATIONS—		
Puerperal Pyrexia	0·00	0·00

DEATHS.

The total number of Deaths registered in the district was 266; 9 of these were of persons whose usual place of residence was outside the district; these have been assigned to the areas in which they formerly resided.

74 deaths of persons normally residing in this area, but dying elsewhere, have been included in the total deaths properly assignable to this district.

CAUSES OF DEATH.

	Males	Females	Total
ALL CAUSES	173	158	331
Tuberculosis of respiratory system	12	3	15
Tuberculosis—other forms	—	—	—
Syphilis	—	1	1
Diphtheria	—	—	—
Whooping Cough	—	—	—
Meningococcal infections	—	—	—
Acute Poliomyelitis	—	—	—
Measles	—	—	—
Other infective and parasitic diseases	—	—	—
Malignant neoplasm, stomach	7	4	11
" " lung, bronchus	2	1	3
" " breast	—	7	7
" " uterus	—	2	2
Other malignant & lymphatic neoplasms	23	9	32
Leukemia, aleukemia	1	—	1
Diabetes	—	—	—
Vascular lesions of nervous system	15	24	39
Coronary disease, angina	17	13	30
Hypertension with heart disease	2	6	8
Other heart diseases	34	48	82
Other circulatory disease	3	2	5
Influenza	—	2	2
Pneumonia	5	8	13
Bronchitis	12	4	16
Other diseases of respiratory system	1	—	1
Ulcer of stomach and duodenum	2	1	3
Gastritis, enteritis and diarrhoea	—	—	—
Nephritis and nephrosis	1	—	1
Hyperplasia of prostate	2	—	2
Pregnancy, childbirth, abortion	—	—	—
Congenital malformations	3	2	5
Other defined and ill-defined diseases	15	10	25
Motor vehicle accidents	5	1	6
All other accidents	5	7	12
Suicide	6	3	9
Homicide and operations of war	—	—	—

SECTION III.
NOTIFIABLE DISEASES DURING 1954.

There were 288 cases notified during the year, excluding Tuberculosis. These tables show the number, by age groups, of Infectious Diseases notified, and the number removed to Hospital.

NOTIFIABLE DISEASES DURING 1954.

There were 288 cases notified during the year, excluding Tuberculosis. These tables show the number, by age groups, of Infectious Diseases notified, and the number removed to Hospital.

DISEASE	Total cases at all ages	Under 1	1—2	3—4	5—9	10—14	15—24	25 & Over	Total cases removed to Hospital	Cases occurring in Warwick Hospital
Scarlet Fever	63	..	3	6	38	8	7	1	15	..
Measles	198	16	52	72	56	2	..	..	4	..
Whooping Cough	1	..	..	..	1	..	..	..	..	..
Poliomyelitis .....	..	..	..	..	..	..	..	..	..	..
Typhoid Fever .....	..	Under 5	5—14	15—44	45—64	65 & Over			..	..
Pneumonia	22	2	5	5	6	1			4	3
Puerperal Pyrexia .....	..	..	..	..	..	..			..	..
Dysentery	3	1	1	..	1	..			..	..
Erysipelas	1	..	..	..	1	..			..	..
Food Poisoning .....	..	..	..	..	..	..			..	..

NOTIFIABLE DISEASES—COMPARATIVE TABLE

DISEASE	1954		1953		1952		1951		1950		1949		Mean of Years 49—53	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Scarlet Fever ..	63	—	51	—	53	—	71	—	193	—	126	—	99	—
Diphtheria ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles ..	198	—	239	—	480	—	293	—	244	—	143	—	280	—
Whooping Cough ..	1	—	118	—	53	—	67	—	95	—	26	—	72	—
Enteric group Fevers ..	—	—	—	—	1	—	1	—	—	—	1	—	1	—
Dysentery ..	3	—	83	—	13	—	57	—	8	—	1	—	32	—
Food Poisoning ..	—	—	18	—	—	—	2	—	—	—	—	—	—	—
Ophthalmia Neonatorum ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia ..	—	—	—	—	3	—	1	—	—	—	—	—	1	—
Ac. Poliomyelitis and Polioccephalitis ..	—	—	—	—	2	—	1	1	2	1	2	1	1	1
Meningococcal Infection ..	—	—	—	—	—	—	2	—	—	2	—	—	—	—
Primary and Influenzal Pneumonia ..	22	15	23	13	19	6	48	8	55	6	35	14	36	9
Erysipelas ..	1	—	8	—	10	—	6	—	3	—	6	—	7	—
Tuberculosis respiratory ..	27	15	37	14	25	3	19	5	14	11	14	7	22	8
Tuberculosis non-respi- ratory ..	2	—	—	—	3	2	5	1	3	1	3	1	2	1
TOTAL ..	317	30	577	27	662	12	573	15	617	21	357	23	553	20

TUBERCULOSIS.

YEARS	NEW CASES				DEATHS			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
0 .....	..	..	..	..	..	..	..	..
1 .....	..	..	..	1	..	..	..	..
5 .....	..	..	..	..	..	..	..	..
10	1	..	..	..	..	..	..	..
15	4	..	..	..	..	..	..	..
20	1	1	1	..	..	..	..	..
25	3	3	..	..	1	..	..	..
35	2	2	..	..	5	..	..	..
45	3	..	..	..	1	2	..	..
55	3	1	..	..	5	1	..	..
65 and upwards	2	1	..	..	..	..	..	..
Totals	19	8	1	1	12	3	..	..
Grand Totals	27		2		15		..	

CASES OF RESPIRATORY AND NON-RESPIRATORY
TUBERCULOSIS ON REGISTER AT 31st DECEMBER.

Year	Pulmonary			Non-Pulmonary		
	Males	Females	Total	Males	Females	Total
1950	42	28	70	19	17	36
1951	49	31	80	20	20	40
1952	62	40	102	21	19	40
1953	81	50	131	21	19	40
1954	97	56	153	22	22	44

SECTION IV.

FOOD HYGIENE.

FOOD AND DRUGS ACT, 1938.

The following details of food samples taken under the above Act, have been supplied by the County Medical Officer of Health.

A total of 194 samples was obtained; of these 161 were of milk (this total includes 3 Channel Islands milk) and the 33 others comprised:—

2 Ice Lollies	2 Skimmed milk and fat compound.
3 Pork sausage	1 Cooking fat.
1 Lard	2 Margarine.
2 Butter	1 Castor oil.
3 Flour	1 Baking powder.
2 Ground rice.	1 Canned carrots.
2 Tapioca.	1 Canned luncheon meat.
1 Canned fruit.	1 Sugar.
1 Canned cream.	1 Epsom salts.
4 Ice cream.	1 Syrup.

All the above samples were reported by the County Analyst to be genuine with the exception of the following:—

<i>Sample</i>	<i>Result of Analysis</i>	<i>Action taken</i>
1 informal milk	Deficient 1·6 per cent. fat.	Vendor notified.
1 skimmed milk and fat compound.	Incomplete list of ingredients. No reference to emulsifying agents, etc.	Importers communicated with.
1 pork sausages	Meat content only 58 per cent.	Vendor interviewed.
1 informal milk	Deficient 5 per cent. fat.	Vendor notified.
1 pork sausages	Meat content only 61 per cent.	Vendor interviewed and further samples obtained

FOOD PREPARING PREMISES.

All premises used for the preparation and storage of food-stuffs, grocers, butchers, ice-cream suppliers and bakehouses were inspected. The supervision of canteens in factories, etc., is included in Section VII of this Report.

ICE-CREAM.

Number of Retail Vendors registered	21
Number of Bacteriological samples taken	55
Result of samples	Grade 1 39
	Grade 2 15
	Grade 3 1
	Grade 4 Nil

In general it may be taken that Grades 1 and 2 are satisfactory and we thus have a total of 1 unsatisfactory sample out of a total of 55.

ICE CREAM.

The figures for the previous 5 years indicate change which has taken place although it must be appreciated that in previous years a number of bad samples were taken from manufacturing premises which have since closed down.

Each retailer is registered under the Food and Drugs Act, 1938, but in every case these are now for the sale of pre-packed Ice-cream only.

MILK SUPPLIES.

Routine milk sampling has continued throughout the year for the purpose of bacteriological analysis, which aims at ensuring a general standard of purity as regards the total number of organisms which affects the keeping quality of the milk (Methylene Blue Tests), the efficiency of pasteurisation processes (the Phosphatase Test) and is concerned specifically as to the presence in the samples of the bacillus of tuberculosis, the bovine species of which is of course the cause of tuberculosis diseases in bones, joints and lymphatic glands, and may also attack other organs of the body.

The following statistics indicate the extent to which this work has been pursued:—

Number of Retail Dairymen registered	13
„ „ Bacteriological samples taken	166
„ „ Samples satisfactory	146
„ „ Samples examined for B.tuberculosis	7
„ „ Samples found to contain B.tuberculosis	Nil
Number of persons licensed to sell Tuberculin-Tested milk	14
Number of persons licensed to sell Pasteurised milk	14
Number of Supplementary licences	29

INSPECTION OF MEAT AND OTHER FOODS.

This work is carried out at a Bacon factory where line dressing is in progress and which places on the Inspector a responsibility which has to be resolved within probably no more than one minute. This duty is exacting and demands both mental and physical output which is not generally appreciated.

Carcases inspected and condemned.

	Cattle, Calves and Sheep			Pigs		
	1952	1953	1954	1952	1953	1954
Number killed (if known) ..	Nil	Nil	Nil	30,296	41,235	49,557
Number inspected	Nil	Nil	Nil	30,296	41,235	49,557
All diseases, except T.B.:						
Whole carcases condemned	Nil	Nil	Nil	30	37	24
Carcases of which some part or organ was condemned	Nil	Nil	Nil	879	1,866	2,576
Percentage of the number inspected affected with disease other than T.B.	Nil	Nil	Nil	3%	4.6%	5.2%
Tuberculosis only:						
Whole carcases condemned	Nil	Nil	Nil	276	186	169
Carcases of which some part or organ was condemned..	Nil	Nil	Nil	998	1,166	1,062
Percentage of the number inspected affected with Tuberculosis	Nil	Nil	Nil	4.2%	3.3%	2.5%

OTHER FOOD-STUFFS CONDEMNED.

90 tins tinned fruit
13 „ „ meat
23 „ „ vegetable
27 „ „ milk.
3 „ „ fish.

72 lbs. dried vegetables.
60 „ mixed dried fruit.
70 „ flour.
20 „ sausage meat.
448 „ biscuits.
161 bottles mineral water.

SECTION V.

HOUSING.

The powers and functions of a Local Authority in respect to Housing are very wide and comprehensive, and to the long list of Statutes and Orders has been added the Housing Repairs and Rents Acts 1954. Technically the latest offspring is as sound as one may expect, but legislation in itself is not sufficient to solve a problem such as housing, and by that word is included not just the building of new dwellings, but the repairing and improvement of mendable houses, the clearing away of slum houses and the redevelopment of derelict areas, unless all parties concerned, Local Authority, Owner and tenant, work in harness and not in opposition.

The Owner is offered more rent if certain responsibilities are executed for the tenant and in exchange the tenant is offered a house properly maintained and if full use is made of the grants towards improvement, accommodation which is more in line with modern standards. It is regrettable to report that there is little evidence of any reasonable percentage of houses being affected by these inducements.

On the other hand the Local Authority is limited in the number of houses it may build while still being urged to rid itself of slum areas as soon as may be. With swollen application lists for houses this problem appears hopeless and yet on examination there is another side of the picture. Building by contractors for private owners is increasing very rapidly and the ability of many people to look after themselves quicker than anyone else can do it for them indicates a healthy outlook; secondly, the housing applications lists contain a comparatively low percentage of persons who are actually in need of rehousing. This percentage varies from parish to parish but certain it is that at any rate in this area the backlog of overcrowded families and those others in 'need' will be settled within the foreseeable future.

To summarise one may assess the problem thus—the persons in need of rehousing, whether because of overcrowding, ill-health or the occupation of slum dwellings will be rehoused within the foreseeable future; the repair and improvement of existing old and in most cases sub-standard houses will continue to drag along without change in tempo, the early conversion of a number of closets to water carriage appears as the only bright gleam in an otherwise dim future.

NEW HOUSES ERECTED.

	Prefabricated			Traditional		
	Temporary.		Permanent.	Permanent		
	1952	1953	1954	1952	1953	1954
Local Authority	Nil	Nil	Nil	67	80	88
Other bodies and persons ..	Nil	Nil	Nil	24	22	73

CARAVANS.

Under the Public Health Act 1936, Local Authorities may grant Licences to persons to allow land occupied by them to be used as a site for caravans or to a person to permit him to occupy a caravan. There are special exceptions, but in general this may be taken to be the rule.

A Local Authority is allowed to adopt standard conditions for site licences and on the enforcement of these conditions one site was closed, and two others brought up to the standard required in the area. Personal licences were issued in 64 cases and the extent of this particular duty may be gauged by the fact that no less than 468 visits were made by Inspectors.

The use of a moveable dwelling in this area is purely for housing purposes; either because permanent housing accommodation is required, or the occupier prefers to live in a caravan, or housing accommodation is required for a temporary period only. Fortunately, the bad type of occupant and the number of structurally unsatisfactory vans have been kept to a minimum by vigorous action.

INSPECTION OF EXISTING PROPERTIES.

INSPECTION OF DWELLING-HOUSES DURING THE YEAR.

1. (a) Total number of dwelling-houses inspected for housing defects (under Public Health and Housing Acts)	466
(b) Number of inspections made for the purpose	1,416
2. Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	8
3. Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not in all respects reasonably fit for human habitation	326

REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICES.

1. Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	219
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ACTION UNDER STATUTORY POWERS DURING THE YEAR.

(a) *Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936:*

(1) Number of dwelling-houses in respect of which notices were served requiring repairs	Nil
(2) Number of dwelling-houses which were rendered fit after service of formal notice:—	
(a) By Owners	Nil
(b) By Local Authority in default of owners	Nil

(b) Proceedings under Public Health Acts:

- | | |
|--------------------------------------------------------------------------------------------------------------|----|
| (1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied | 68 |
| (2) Number of dwelling-houses in which defects were remedied after service of formal notices:— | |
| (a) By Owners | 54 |
| (b) By Local Authority in default of owners ... | 3 |

(c) Proceedings under Sections 11 and 13 of the Housing Act, 1936:

- | | |
|-------------------------------------------------------------------------------------|-----|
| (1) Number of dwelling-houses in respect of which Demolition Orders were made | Nil |
| (2) Number of dwelling-houses demolished in pursuance of Demolition Orders | Nil |

(d) Proceedings under Miscellaneous (General Provisions) Act, 1953

8

LEGAL ACTION.

<i>Case.</i>	<i>Nuisance.</i>	<i>Court decision.</i>
Case No. 1:	House roof, chimney stack, flashings and wallplaster.	7th April, 1954. Case withdrawn upon payment of Costs by defendant. Work completed.
Case No. 2:	House roof.	7th April, 1954. Nuisance Order granted, work to be completed within 14 days. Costs granted.
Case No. 3:	Various Housing defects.	7th April, 1965. (1) Case adjourned until 5/5/54. Undertaking to Court to complete work in that period. Costs granted. 5th May, 1954. (2) Nuisance Order granted, work to be completed within 28 days.
Case No. 4:	Various Housing defects.	21st April, 1954. (1) Nuisance Order granted for 28 days. (2) 2nd June, 1954. Penalty £2 Costs granted.

- | | | |
|-------------------------|-------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Case No. 5: | Closet roof and
brickwork. | 21st April, 1954.
(1) Case adjourned for 28
days.
19th May, 1954.
(2) Case adjourned until
2/6/54.
2nd June, 1954.
(3) Case withdrawn, work
completed. |
| Case No. 6: | Non - compli-
ance of
"Standard
Conditions." | 7th July, 1954.
(1) Case adjourned until
18/8/54.
18th August, 1954.
(2) Case adjourned until
6/10/54.
6th October, 1954.
(3) Case withdrawn. Con-
ditions complied with. |
| Case No. 7:
Caravan. | Defendant's
Refusal to
grant Licence. | 20th October, 1954.
(1) Appeal against Notice
of refusal. Case ad-
journed for one month
17/11/54.
(2) Appeal withdrawn,
case dismissed. |

SECTION VI.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER SUPPLY.

A piped supply of water extends throughout the area, with the exception of some isolated farms and cottages. The principal supplier is Warrington Corporation, but a small area of Cuerdley parish is supplied by Liverpool Corporation.

In general the supply is good both in quality and quantity, but serious shortages have occurred from time to time in both Burtonwood, Great Sankey and Padgate.

Efforts have been made by the Warrington Corporation to increase the supply in these particular parishes but not entirely with success.

PARISH	From Public Mains			From Private supplies, e.g. wells, springs, etc.	
	Direct to houses	By means of stand pipe			
	No. of dwelling houses	No. of dwelling houses	No. of population	No. of dwelling houses	No. of population
Burtonwood	682	4	16	7	21
Croft	421	4	15	1	3
Cuerdley	45	—	—	—	—
Penketh	1,246	—	—	—	—
Poulton	1,490	—	—	1	4
Rixton	554	—	—	1	3
Sankey	1,449	1	3	—	—
Winwick plus Mental Hospital ..	443	1	3	5	11
Woolston	792	—	—	—	—
Totals	7,122	10	37	15	42

RIVERS AND STREAMS.

The area is traversed from north to south by two main streams—the Sankey Brook and the River Glaze. Across the southern boundary runs the River Mersey, the eventual outlet for these streams. There are several smaller brooks winding through the area, but none of any particular note.

The fact that these brooks exist seems to have provided a wonderful opportunity for building development—a ready-made drainage system to hand. The rapid development of the area since the middle twenties has now changed these brooks into open sewers.

The development of proper sewerage systems are required to remove the extensive pollution and, until this occurs, then our rivers and streams will remain as such in name only.

DRAINAGE AND SEWERAGE.

The drainage from over 70 per cent. of the properties in this area consists of treatments in a septic tank with a subsequent discharge of the effluent into the nearest ditch or stream.

The cleansing of these septic tanks and ditches is carried out by the Surveyor's Department by means of a mechanical cesspool emptier. In general efforts are made to cleanse each tank once each twelve months and this is done as a charge on the rates. Where however, for some reason this service is required within that period then the ratepayer is charged. Commercial properties are not included in the general scheme and are charged for whatever service is rendered.

The provision of a new sewer from Chapel Lane, Burtonwood, to the Sankey Valley sewer will mean that this small works will become redundant and what had become in fact a nuisance removed. A small settling tank and circular filter deals with an estate in Glazebrook, but, again, the effluent is unsatisfactory. A small treatment works dealing with effluent from a Council housing estate has been gradually improved although its position leaves much to be desired; regular maintenance has kept it free from nuisance. The remaining sewage drains via septic tanks of varying size and construction to the open sewers, i.e. the streams.

Several schemes are in hand for the sewerage of the more urbanised parishes.

A scheme for the parishes of Poulton-with-Fearnhead and Woolston has been approved and preliminary works for the project have been put in hand.

A revised scheme for Penketh and Great Sankey is being submitted to the Ministry for final approval and it is hoped that a starting date will soon be fixed.

With the exception of the treatment works the Sankey Valley scheme is now almost completed. A main drainage scheme has been prepared for Winwick, approval for which is hoped to be received during 1954. At Croft a scheme is being developed for the existing and proposed Council estate together with the central area of the village proper.

PUBLIC CLEANSING.

The collection and disposal of refuse, together with its ancillary functions by the Local Authority, is under the control of the Chief Sanitary Inspector. The collection service, which is weekly, is carried out by special-type refuse vehicles, with loaders' cab. Due to the fairly long distances that machines have to travel from the depot, the inclusion of the loaders in the driver's cab is obviously a desirable feature. Certainly the weather protection and additional safety provided appear to be thoroughly appreciated by the workmen.

The collection of pail contents is carried out weekly by a similar machine. A detachable tank is mounted on rollers inside the body, a method which simplifies both loading and unloading. Supplies of both liquid and powder disinfectants are carried in order that pail compartments and pails may be treated as required. This procedure is far from satisfactory, but is probably as effective as any other under the circumstances. The only solution to this problem is the conversion of the pail closets as rapidly as possible to a water-carriage system.

All workmen are provided with protective clothing, and although this provision is by no means cheap, yet it is a feature that is now a necessity if workmen are to be encouraged to engage in this class of work.

The provision of dustbins and sanitary pails is carried out by the Local Authority as a rate charge and enables unsatisfactory bins and pails to be replaced with the minimum of delay. The storage of refuse at the home, pending collection, must obviously be in a hygienic manner, and this can only be effected by the provision of a proper receptacle. B.S.S. bins are purchased in bulk and delivered weekly. Weekly reports are received from each driver of the bins and pails requiring replacement, the addresses are checked in a card index file, the bin or pail is inspected, and delivery receipts are signed by the householder. Where a bin is being mis-used, a visit is paid by an inspector, when the householder is warned that they will be held liable for replacement. Three sizes of bins are issued— $3\frac{1}{2}$, $2\frac{1}{2}$ and 2 cubic feet, the size of bin being decided by the type of house and size of family.

A depot has been provided in Hawthorne Avenue, Woolston. The building, of modern construction and design, enables vehicles to be properly cared for and serviced.

A scheme for the quarterly inspection of vehicles by a sub-committee at which points are awarded for maintenance and cleanliness has provided a competitive spirit in this work, and the monetary prizes awarded appear to take second place to the pride

which the winning driver takes in his achievement. This scheme has raised vehicle care and maintenance to a higher level and ensures that each driver becomes fully cognisant of what is required of him.

The disposal of dry refuse takes place at several tips throughout the area, and, although sometimes they are not as "controlled" as one would wish, they are a decided improvement over past methods of disposal. A Chaseside Light Excavator-cum-Bulldozer is employed to excavate, soil and cover the tipping sites. Wire netting screens are provided to prevent nuisance by blowing paper, and all reasonable steps are taken to ensure that the sites are satisfactory.

The gradually-increasing number of houses of the semi-detached and detached type, and the conversion of hostel sites into flats has, because of long carries, considerably increased the collection time since the end of the war. A special twice weekly collection of refuse is made from certain hostel sites. For these additional services a special charge is made.

STATISTICS:

Machines employed—

Karrier Bantam with "Derby" body.....	2
Karrier CK.3, with "Derby" body	3
Karrier CK.3, Refuse Collector, with standard steel body	1
Karrier Gamecock (since April, 1953)	1
Commer van	1
Chaseside Excavator	1
Trailers	3

Workmen—

Number of Drivers	7
„ Labourers; all classes	24
Foreman	1

Dustbins and Pails—

Number of Dustbins provided	596
„ Pails provided	96

Loads tipped by the R.A.F., Croft, Woolston:—

156 loads £19 10s. 0d.

SALVAGE.

The direct collection of Salvage has been confined solely to waste paper and cardboard. Due to the scattered nature of the

area and the number of tipping sites, it is not considered that other materials could be separated and sold at a profit.

The collection of waste paper is made by means of large, covered trailers behind a refuse collection vehicle. The provision of a smart trailer serves a two-fold purpose—a good advertisement, and, secondly, an eminently suitable collection method.

Shops and large business premises are visited once each week by a special vehicle. The sorting of paper at tips is not as thorough or as satisfactory as one would wish, due to the soiling of paper after mixing with household refuse.

Kitchen waste is collected by a private contractor from two hostel sites. These sites were canvassed, bins were hired out to the contractor, and arrangements made for suitable collection times. No complaints have been received of this service.

STATISTICS:

The amount of waste paper sold during the last three years was as follows:—

	tons	cwts.	qrs.	£	s.	d.
1952	232	2	1	2,423	9	9
1953	236	5	2	1,637	17	11
1954	297	3	0	2,270	7	4

A bonus is paid to workmen on the weight of paper collected each month above a fixed datum figure. Salvage prices have continued to fluctuate but a steady rise appears to be indicated. This trend has enabled only a reasonable income to be obtained, in spite of the fact that this is the highest amount of paper ever collected.

RODENT CONTROL.

The recommendations of the Ministry of Agriculture and Fisheries are pursued in this sphere of work. One operative is engaged whole-time and one part-time, and the methods used are those recommended by the Ministry. Both the operative and the general foreman have undertaken special instruction courses organised by the Ministry.

All Local Authority's properties, refuse tips, sewerage works' etc., were regularly inspected and treated. The sewers and sewer ditches were test-baited and treated where necessary.

On private properties, treatment is carried out by agreement. Private houses are charged where the costs are recoverable, but all business premises are charged the full cost of treatment. The two offensive trade factories are both classed as areas of reservoir infestation, and both have private contracts in force with service operators.

This work is now the duty of a Local Authority, and effective measure must be undertaken to ensure that the rat population is kept to a minimum. The interest of the Central Authority is obvious by the fact that a 50 per cent. grant on approved expenditure is obtained from the Ministry of Agriculture and Fisheries.

STATISTICS:

The number of infestation treatments were as follows:—

	Major.	Minor.
Business premises	1	19
Private dwellings	—	124
Local Authority	2	118

In addition, 88 manholes were test-baited.

SMOKE ABATEMENT.

Regular observations have been made of all factory chimneys for smoke emission. No serious problem is created in the area, but where necessary informal steps have been taken to bring to the notice of the management the nuisance being created. It is pleasing to note that in this branch of work pleasant and effective relations are maintained with the factory managers, so that formal proceedings have been completely unnecessary. In one case changes in stoking technique and fuel were used until such time as a mechanical stoker could be installed. This resulted in the nuisance being abated.

VERMINOUS AND FILTHY PREMISES.

The days when the serious infestation by bugs, of numbers of houses, seem to have gone, certainly so in this district. The residual toxicity of D.D.T. seems to have provided a long-awaited answer to the problem. Very few houses required treatment and, of these, the infestations were not heavy.

Occasional filthy houses have been dealt with, and what appears most surprising is the fact that the houses in question are of comparatively modern construction.

OFFENSIVE TRADES.

There are two offensive trades in the area, both of which require considerable supervision. The trades carried out are fat extraction, bone boiling, and glue making. One factory is also combined with a Knackers' yard and produces pet foods.

Control is exercised by means of issuing quarterly licences only to each factory. This procedure is considered more effective than the issue of statutory notices.

To prevent flies, each factory carries out spray patrol, whereby the whole of the premises are treated with D.D.T. insecticides. This system has proved of marked benefit.

Premises in Risley, used for breeding maggots for use as fish bait, not legally an Offensive Trade, have been regularly visited to ensure that a reasonable standard of cleanliness and control is maintained.

This class of work takes up a surprising amount of inspectorial time, particularly in the warmer months of the year, and yet it is only by maintaining regular and continued visits that satisfactory results are obtained.

SANITARY ACCOMMODATION OF HOUSES AND SCHOOLS.

The fact that the majority of houses in the area are of comparatively modern construction, and that ditches and streams were available for the discharge of effluents has, in spite of the lack of sewerage systems, been responsible for the majority having water closets with treatment by means of a septic tank. Over 70 per cent. of the houses in the district are so fitted. The remaining number are provided with pail closets. Middens and ashpits are now things of the past, and one can but hope that the same could be said for pail closets.

Where pail closets exist in isolated cottages this form of sanitation, in the majority of cases, appears reasonable, but when a large number are concentrated in one area—in particular, Burtonwood village, steps should be taken to enable conversions to take place without delay.

Preliminary steps are in hand to connect to sewers in the central areas of Burtonwood and Collins Green to the Sankey Valley sewer and as the work required is comparatively small energetic action should enable pail closets to be converted to water carriage in the early future.

The sewerage scheme in Poulton and Woolston is not yet at such an advanced state of development when the question of conversions can be considered.

All schools have now been converted to water closets but the fact remains that in some of the older schools improvements are required as regards sufficiency of sanitary accommodation and of facilities for ablution.

SECTION VII.

INDUSTRIAL AND COMMERCIAL CIRCUMSTANCES.

FACTORIES ACT, 1937.

There are now 39 factories registered in the area, the principal ones being engaged in tanning, light engineering, wire-rope making and brewing. Routine inspections have been made and the attention of H.M. Inspector of Factories has been drawn to matters within his jurisdiction.

Particular attention has been paid to the standards of hygiene practised in the canteens. Some of these are maintained and run to the highest standards, but in others, constant supervision is necessary. A special approach is made to each manageress and staff to ensure that scrupulous attention is paid to personal hygiene. Circulars and posters have been provided for use within the canteens and kitchens.

Good co-operation has existed with all factory managements and in no case has there been any necessity for statutory action on any of the matters for which the Local Authority is responsible.

The duty of issuing certificates for the means of escape in case of fire is one for which this department is responsible. These certificates need to be amended from time to time, due to the alteration in the number of employees and building extensions.

SHOPS AND OFFICES.

Certain duties in the inspection of shops devolve on this Authority and certain others on the County Council. The inspectoral duties of the County Council have now been delegated to this Authority. The procedure is for half-yearly reports to be sent to the County on the matters for which it holds responsibility for action to be taken where necessary. It is unfortunate that this procedure tends to discourage the Inspector concerned from taking more than a cursory interest in this sphere of work.

It has not been found necessary to take statutory action to secure any of the requirements under the purview of this Council, all recommendations having been dealt with informally.

PETROLEUM AND CARBIDE STORAGE.

The number of Licences issued for the storage of Petroleum and Carbide of Calcium are as follows:—

Number of Licences to store Petroleum	57
„ „ gallons of storage capacity	64,910
„ „ Licences to store Carbide	5

Total amount of Carbide permitted	lbs.	3,792		
Number of Licences to store other spirits.....			5	
Total amount of Fees paid:—	£	s.	d.	
Petroleum	38	5	0	
Carbide of Calcium	1	10	0	
Cellulose	1	5	0	
	£41	0	0	

The renewal of licences for the storage of petroleum and carbide is at the end of each year and it has not proved possible to carry out as many inspections as one would wish. These have been confined to new premises and the testing of underground storage tanks at the older petrol stations.

SECTION VIII.

SUMMARY OF SANITARY INSPECTOR'S VISITS.

1954.

Water Supply	62
Drainage	420
Stables and Piggeries	20
Offensive Trades	67
Fried Fish Shops	16
Tents, Vans and Sheds	468
Factories	80
Workplaces	5
Bakehouses	15
Licensed Premises	7
Refuse Collection	312
„ Disposal	191
Defective Bins	596
„ Pails	96
Rats and Mice	26
Schools	28
Shops' Act	264
Salvage	186
Petroleum	46
Housing Applications and Visits	159
Means of Escape in Case of Fire	19
Miscellaneous	109

UNDER PUBLIC HEALTH ACTS.

Number of houses inspected	466
Visits paid to above houses	1,416

UNDER HOUSING ACTS.

Number of houses inspected	59
Visits paid to above houses	71

OVERCROWDING.

Number of houses inspected	4
Visits paid to above houses	7

VERMINOUS PREMISES.

Number of houses inspected	20
Visits paid to above houses	23
Miscellaneous Housing Visits	82

INFECTIOUS DISEASE.

Inquiries in cases of Infectious Disease	76
Visits <i>re</i> disinfection	44
Miscellaneous Infectious Disease visits	16

INSPECTION OF MEAT AND OTHER FOODS.

Visits to Slaughter-houses	323
" " Shops and Stalls	1
" " Other Premises.....	1
Total Meat Inspection Visits	325
Visits to Butchers.....	25
" " Grocers	20
" " Greengrocers and Fruiterers	1
" " Dairies and Milkshops	8
" " Ice-Cream premises	6
" " Food-preparing premises	91
" " Restaurants	34
" " Canteens	25
Milk samples:—	
Bacteriological	166
T.B.	7
Ice-Cream samples	50
Miscellaneous food visits	43

SECTION IX.

PROVISION OF GENERAL HEALTH AND ANCILLARY SERVICES IN THE DISTRICT.

(1) LABORATORY ARRANGEMENTS.

Public Health Laboratory Service and County Analyst's Department.

Pathological specimens, samples of milk, food, "swabs," etc., for bacteriological investigation are dealt with by the Public Health Laboratory Service, either at the Public Health Laboratory, Mount Pleasant, Liverpool, or the Laboratory at Monsall Hospital, Monsall, Manchester. The chemical analysis of water supplies and of samples of food and drugs is undertaken at the County Analysts's Department, County Offices, Preston.

(2) HOSPITAL ARRANGEMENTS.

(Liverpool Regional Hospital Board: Warrington and District Hospital Management Committee).

The district contains no general hospitals within its boundaries, but it is, of course, well served by those within the County Borough of Warrington; the Warrington Infirmary and the General Hospital, Warrington, for both general and specialised types of cases, *e.g.*, orthopaedic and maternity cases; the latter type of case from the Rural District is admitted also to the Warrington Maternity Home, Victoria Park, Latchford. Cases of infectious disease (other than Smallpox) requiring hospital treatment are accommodated at the Isolation Hospital, Warrington; cases of Smallpox, should these occur, are admitted to the special Smallpox Hospital at Rock Ferry, Cheshire, belonging to the Port of Liverpool Sanitary Authority.

In addition to the above, accommodation in hospitals administered by the St. Helens and District Hospital Management Committee is not uncommonly utilised by residents in the Rural area, particularly the County Hospital, Whiston, for maternity cases. Finally, cases requiring highly specialised treatment for paediatric, orthopaedic, ophthalmic, gynaecological and ear, nose and throat defects may be admitted by arrangement to any of the "teaching hospitals" attached to the Universities of Liverpool or Manchester.

(3) AMBULANCE ARRANGEMENTS.

Full responsibility for the Ambulance Services to be provided under Section 27 of the National Health Service Act rests with the Lancashire County Council, as the Local Health Authority. This Rural District, enclosing as it does the northerly boundaries of the Warrington County Borough, for its greater part is serviced by ambulances of the County Borough operating on behalf of the

County Council, the parishes so served being those of Penketh, Great Sankey, Burtonwood (part), Winwick (part), Croft, Poulton-with-Fearnhead, Woolston, and Rixton-with-Glazebrook. The remainder of the district is served directly by the County Ambulance Service from the ambulance stations at Newton-le-Willows (Newton-le-Willows 2013), which deals with the northerly parts of the parishes of Burtonwood and Winwick, and at Mill Brow, Widnes (Widnes 2121), which deals with the Parish of Cuerdley.

Cases conveyed by ambulance from the Newton-le-Willows and adjoining county stations during the year totalled 961, of which 167 were emergency, 791 general and 3 cases of infectious disease. In addition, the County Borough Ambulance Service, on behalf of the County Council, transported 156 emergency, 2,032 general and 22 infectious cases, making a total of 2,210, and a combined total of 3,171.

(4) TREATMENT CENTRES AND CLINICS.

School Health Service: School Clinics.

Schoolchildren in attendance at schools within the Rural area who require advice and treatment at a school clinic are referred to the Clinics at Widnes, Prescot, Earlestown and Cadishead, where general medical advice and treatment facilities for minor ailments, dental, ophthalmic and orthopaedic defects are available.

It is, however, a matter for great regret that no school clinic premises are available in the area at which special inspections could be carried out and specialist advice and treatment (ophthalmic, orthopaedic and, of course, dental) obtained. However, to give really effective cover to the district from the school health aspect would mean two clinics, one in the Penketh and Sankey and one in the Padgate and Woolston areas, and this provision can hardly be justified by the school population concerned.

Child Welfare Centres.

Sessions are held at the Infant Welfare Centres detailed below. At these centres medical and nursing advice is available for all infants and for children of pre-school age, also for expectant mothers and those recently confined, in relation to matters affecting their general health. Supplies of a variety of infant foods, vitamin preparations, etc., are also available at cost price: and since the early part of the year National Dried Milk, Orange Juice and Cod Liver Oil—"Welfare Foods," formerly distributed under the auspices of the Ministry of Food, have been dispersed at these

centres. In addition, in special cases, schoolchildren may be examined and parents advised, although, of course, this is not a regular feature of this work.

- (a) **BURTONWOOD:**
 Methodist Sunday School, Phipps Lane.
 Medical Officer—Dr. Christian.
 Health Visitor in charge—Miss M. Williams.
 Sessions—Weekly, each Thursday, 10.0 a.m. - 12 noon.
- (b) **CROFT:**
 Memorial Institute, Mustard Lane.
 Medical Officer—Dr. G. Ellis.
 Health Visitor in charge—Mrs. Griffiths.
 Sessions—Fortnightly, alternate Mondays, 2.0-4.0 p.m.
- (c) **PADGATE:**
 Methodist Sunday School, Padgate Lane.
 Medical Officer—Dr. H. G. M. Bennett.
 Health Visitor in charge—Miss C. M. Smith.
 Sessions—Weekly, each Wednesday, 2.0-4.0 p.m.
- (d) **PENKETH:**
 Methodist Sunday School, Chapel Lane.
 Medical Officer—Dr. H. G. M. Bennett.
 Health Visitor in charge—Miss W. Henry.
 Sessions—Weekly, each Monday, 2.0-4.0 p.m.
- (e) **SANKEY:**
 Sankey Day Nursery, Marina Avenue.
 Medical Officer—Dr. H. G. M. Bennett.
 Health Visitor in charge—Miss W. Henry.
 Sessions—Weekly, Friday, 2.0-4.0 p.m.
- (f) **WINWICK:**
 Methodist Church Hall, Golborne Road.
 Medical Officer—Dr. G. Ellis.
 Health Visitor in charge—Mrs. Griffiths.
 Sessions—Fortnightly, alternate Thursdays, 2.0-4.0 p.m.
- (g) **WOOLSTON:**
 Old Church of England School, Warren Lane.
 Medical Officer—Dr. H. G. M. Bennett.
 Health Visitor in charge—Miss C. M. Smith.
 Sessions—Fortnightly, alternate Thursdays, 2.0-4.0 p.m.

During the year under review the following attendances were made at the above Welfare Centres:—

Number of individual children attending:	
Born in 1953.....	276
„ „ 1952.....	250
„ „ 1951-48	299
Total	<u>825</u>

Number of attendances made by children:

Under 1 year of age	4,564
1 - 2 years of age.....	1,119
2 - 4 ,, ,,	1,688
Total	<u>7,371</u>

In addition, expectant mothers made 209 attendances at these Centres.

(5) MIDWIFERY ARRANGEMENTS.

(a) Domiciliary. One whole-time domiciliary midwife and five district nurse/midwives are engaged on this work within the Rural District, in the employment of the County Council, which is both the Local Health Authority and the Supervising Authority under the Midwives' Acts. These ladies normally accept responsibility for cases residing within reasonable proximity of their homes, but the principle of the expectant mothers' free choice of midwife, (as of doctor), is well established. Each has motor-car transport at her disposal to enable her to respond quickly to urgent calls, and to carry apparatus for analgesia.

The names and addresses of these ladies are:—

WHOLE-TIME MIDWIFE:

Mrs. M. A. Lawton, 21 Marina Avenue, Sankey.

WHOLE-TIME NURSE/MIDWIVES:

Miss L. M. Liptrot, 26 Hawthorne Grove, Paddington.

Mrs. T. F. McConnell, 56 Haley Road, South, Burtonwood.

Mrs. K. M. McCarron, 20 Brookside Avenue, Sankey.

Mrs. D. Woodward, 23 Bevin Avenue, Culcheth.

Mrs. V. M. Gibbins, 300 Padgate Lane, Padgate.

A total of 146 babies were born in their own homes during the year; with possibly one or two exceptions, their mothers were either actually delivered, or attended, by the midwives and nurse/midwives detailed above. The fact that there have been no cases of puerperal pyrexia, and no maternal death associated with childbirth is surely the highest tribute to the skill and care bestowed on the mothers both during and after confinement.

(6) HEALTH VISITING ARRANGEMENTS.

This work has been carried out by four whole-time and fully-trained Health Visitors, who combine with health visiting duties those of School Nurse. These domiciliary visits, so necessary from the standpoint both of the supervision and of the health education of the families, are, of course, complementary to the work carried out at the Child Welfare Centre, as described above.

The names and addresses of the Health Visitors are:—

for Sankey, Penketh and Cuerdley:

Miss W. Henry, 38 Greens Road, Whiston, Prescott.

for Padgate, Woolston, Houghton Green:

Miss C. M. Smith, 9 Worsley Road, Walton, Warrington.

for Burtonwood:

Miss M. Williams, 16 Ruskin Avenue, Newton-le-Willows.

for Winwick and Croft:

Mrs. E. I. Griffiths, 33 Wigan Road, Standish, Wigan.

(7) HOME NURSING ARRANGEMENTS.

Home nursing is undertaken by five whole-time nurse/midwives.

The demand for their services has continued to grow during the year, and although part-time relief nurses have also assisted from time to time, an extension of the staff is contemplated within the near future.

The names and addresses of the Nurses are:—

Miss L. M. Liptrot, 16 Hawthorne Grove, Paddington.

Phone No.: Warrington 4297.

Mrs. V. M. Gibbins, 300 Padgate Lane, Padgate.

Phone No.: Warrington 1834.

Mrs. T. F. McConnell, 56 Haley Road South, Burtonwood. Phone No.: Newton-le-Willows 3217.

Mrs. K. M. McCarron, 20 Brookside Avenue, Sankey.

Phone No.: Penketh 2147.

Mrs. D. Woodward, 23 Bevin Avenue, Culcheth.

Phone No.: Culcheth 2110.

(8) HOME HELP ARRANGEMENTS.

This is "permissory" service provided by the County Council through the No. 10 Divisional Health Committee, and is one which is not necessarily provided free of cost to the public. Its aim is to provide domestic help, when required, by reason of the presence in a household of sickness, pregnancy, mental deficiency, or to assist in the care of a child or children under school-leaving age. The service has expanded considerably during the year as members of the public have become more fully aware of the facilities provided.

The Home Helps engaged are all part-time "Helps"; no whole-time workers are employed. A number of "Helps" are, however, paid a retaining fee in consideration of their undertaking to be available when required.

(9) MENTAL HEALTH ARRANGEMENTS.

The district is covered for this purpose by two full-time Authorised Officers of No. 10 Health Division and by a lady mental health worker, who deal with the various aspects of mental health, including all cases in which investigation, supervision and appropriate action is required under the Lunacy Acts, Mental Deficiency Acts and the Mental Treatment Act. The names and addresses of these officers are:—

Mr. P. D. Parker, 12 Kenyon Lane, Lowton, near Warrington.

Mr. F. Griffin, Post Office, Melling, Liverpool.

Miss M. V. Phillips, Divisional Health Offices, The Old Rectory, Winwick.

(10) ARRANGEMENTS FOR THE PREVENTION OF ILLNESS, CARE AND AFTER-CARE (INCLUDING TUBERCULOSIS) AND THE PROVISION OF CONVALESCENT ACCOMMODATION.

(1) Responsibility for the above rests with the Local Health Authority partly on an obligatory and partly on a permissive basis; "illness" includes mental defectiveness. The scope of such arrangements is very wide, and includes all the methods of health education and propaganda relating to health matters, health visiting in the homes, including those of persons suffering from Tuberculosis, the provision of nursing and ancillary equipment, the after-care of patients who have suffered from illness either at home or in hospital, and the provision of convalescent accommodation and rehabilitation where this is required, to enable those recently sick to regain full health and strength.

(2) Responsibility for the supervision of cases of tuberculosis in the homes and for that of family contacts, to ensure appropriate examinations and advice by the Chest Physician, now devolves on a single health visitor, covering the whole of the Rural District, and working in the closest contact with the Chest Physicians at clinics in Warrington, Widnes and St. Helens. This is a most difficult, almost impossible task, utilising only the available public transport service, and it is greatly to be hoped that the Health Visitor concerned will shortly be able to use a car when carrying out her duties. The name and official address of the Health Visitor and details of the Chest Clinic sessions concerned with Rural District cases are given below:—

Miss M. Monks, c/o Divisional Health Office, The Old Rectory, Winwick.

CHEST CLINICS:

Warrington General Hospital—

Sessions: Tuesday evening, 5.30—6.30 p.m.; Wednesday, 3.0—4.0 p.m.; Friday, 9.30 a.m.—10.30 a.m.

Widnes, Chapel Street—

Sessions: Monday, Tuesday and Friday: 2.0—4.0 p.m.

St. Helens Chest Clinic, Bank House Clinic, Claughton Street—

Sessions: Monday, 9.0 a.m.—1.0 p.m. 2.0—4.30 p.m.
 Tuesday, 9.0 a.m.—1.0 p.m. 2.0—4.30 p.m.
 Wednesday, 5.0—7.0 p.m.
 Thursday, 9.0 a.m.—1.0 p.m.
 Friday, 2.0—4.0 p.m.

Newton-le-Willows Chest Clinic, Cottage Hospital, Bradlegh Road—

Sessions: Monday, 9.0 a.m.—12 noon; Wednesday, 9.0 a.m.—12 noon.

HEALTH EDUCATION.

As regards Health Education (a very important and essential factor in the prevention of illness), it is pertinent here to emphasise that although some responsibility for this section of preventive medicine may be accepted (as has been the case) by the Local Health Authority, the permissive power of the Council as a Local Sanitary Authority to carry out measures of health education under Section 179 of the Public Health Act, 1936, is still extant and should, in my view, continue to be exercised.

VACCINATION AND IMMUNISATION ARRANGEMENTS.

Vaccination and Immunisation against Diphtheria are available to all who desire it for themselves or for their children, either through the family Doctor (who undertakes it at his home or at his surgery as part of his duties to the patient) or, on request, by appointment. Such services may be obtained at one of the Immunisation sessions which are held at approximately monthly intervals in schools at Great Sankey, Penketh and Padgate. Immunisation of infants and small children is also undertaken—when circumstances warrant—at the Child Welfare Centres at Burtonwood, Winwick, and Croft.

As regards the Immunisation position, there are no grounds for complacency, whilst the vaccination state is frankly unsatisfactory.

During the year, a total of 272 children under 15 years of age completed the full course of Immunisation, of which 226 were

under the age of five years. In addition to the above, 140 children, all of school age, received reinforcement or "booster" injections, making a grand total of 412.

The percentage proportion of the estimated child population (under the age of 15 years) in an immunised state as at 31st December, 1953, was 59% as against a figure of 65% for the child population in No. 10 Health Division as a whole.

In contrast to the above, only 95 children under one year of age underwent primary vaccination, of which all were successful, whilst of 8 persons over the age of 15 years who received primary vaccination all were successfully vaccinated. In addition to the above, a total of 37 persons were re-vaccinated, all but 1 successfully.

If one deducts from the total of 481 live births in 1953 belonging to the district the 14 infant deaths in 1954—this means that out of the 467 survivors only 95 underwent primary vaccination, or approximately one in every five babies. This dangerously low proportion can only be viewed with serious dismay.

SECTION X.

NATIONAL ASSISTANCE ACT, 1948.

The Local Authority carrying responsibility for the implementation of Parts III and IV of this Act is the County Council, and the administrative machinery, in this case also, is on a divisional basis. The main provision of Part III relate to the provision of accommodation for persons who, by virtue of circumstances which could not reasonably have been foreseen, are without lodging; and to Welfare Services in general for persons handicapped by infirmities such as Blindness, Deafness, Dumbness, crippling physical defects, and other disabilities.

The approved scheme of the County Council in regard to Welfare utilises very fully the services rendered by the various voluntary agencies already in existence prior to this legislation.

Section 47 of this Act prescribes the procedure whereby aged and infirm persons, if not receiving adequate care and attention in their own homes, may, by a Court Order, be removed to a suitable hospital following a hearing by the Court of evidence in support of a certificate issued by the Medical Officer of Health after close consideration of all the circumstances of the case.

Section 50 is of importance in that it places on this County District Authority the duty of arranging for the burial or cremation of the body of any person who has died or been found dead within the district when "it appears to the Authority that no suitable arrangements for the disposal of the body have been or are being made otherwise than by the Authority."

No action under either of these sections has been called for during the year.

SECTION XI.

THE CHILDREN ACT, 1948.

In the main, this Act provides for the care and welfare of children and young persons up to the age of 18 years who for one reason or another are deprived of normal home life, and it thus has an important bearing on the mental and physical health of such children.

The County Council, which is the Local Authority for the purposes of this Act, exercises its functions through its Children's Committee and the Children's Officer, who is responsible to the Committee for the efficient administration and day-to-day operation of the service, which is carried out on a regional or area basis.

The Warrington Rural District lies administratively within the responsibility of the Children's Officer for the Leigh area; an area newly constituted during 1953, to which Miss E. Cole was appointed as Area Children's Officer, with offices in Leigh itself. The reorganisation within the Children's Department has made possible a closer and more effective liaison between that department and my own as Divisional Medical Officer.

Fortunately the days of serious neglect and wilful brutality have receded, but there still exists an appreciable number of cases where minor degrees of cruelty and neglect arise often as the result of indifference or simply inadequacy on the part of the parents. Such cases must give rise to concern in the minds of a number of different groups of social workers: Children's Visitors, Health Visitors. Inspectors of the N.S.P.C.C., etc. — and are not infrequently complicated by insanitary and overcrowded housing conditions, or the frank mental backwardness or defectiveness of parents and/or children. In order to integrate all viewpoints, to consider the action most appropriate and the officer in whose particular sphere of influence the probable remedy lies, regular case conferences are held (at two monthly intervals) and are attended by representatives of both statutory authorities and voluntary agencies which have the interests and welfare of children at heart. These conferences have been most valuable in enabling effective supervisory remedial measures to be undertaken.



